

*MAY 18, 2013: "LOOKING FORWARD, LOOKING BACK" - Community Dialogue – Discussion Breakout notes*

*Following speaker presentations, attendees were asked to participate in group breakout discussions. Each participant was randomly chosen for one of the three groups. Each breakout group responded to the same set of questions (below). Human Services Council members served as convenors. County staff recorded on flip chart paper the conversation key points. A brief report out on the information collected was provided to group participants*

**Questions:**

1. *What is your reaction to today's speakers and the question and answer session?*
  - *Any surprises in the information shared?*
  - *Any challenges in responding to speakers' presentations/q and a's?*
  - *Any opportunities in responding to speakers' presentations/q and a's?*
2. *If you have attended forums in the past (sponsored by the Council), how have you used the information you learned at the session?*
3. *If the Council were to sponsor more opportunities for community dialogue, what would you like the theme or topic to cover?*
4. *Prioritize challenges and opportunities (question 1). – top three for group*
5. *If you were to say what action attendees today should collectively take, what one or two things would those be?*

**Summary of Future Action – suggestions**

**The following summarizes suggestions made in the small group discussion on the possible opportunities for continued community dialogue on topics of community interest, specifically regarding the following:**

**Leadership Education/Community Advocacy Areas:**

- Educate legislators vigorously/develop relationships: TANF Reimbursement rates; child care policies and subsidy programs; need for Medicaid expansion: incentives for health providers to participate in Medicaid, Medicare and the exchanges; funding for Infant Toddler Connection; more state funding for behavioral health needs for individuals – youth and adults

**Community Engagement Strategies:**

- The Council should continue to provide general community education opportunities
- The Council should develop strategies to reach out to the business sector

**Service Strategies and Effectiveness for specific problems/needs – Suggested TOPICS for future:**

- Homeless individuals and families - victims of domestic violence; and persons needing employment/assistance
- Dealing with clients holistically
- Collaboration and education on health access with residents and employers who will qualify for assistance in the health insurance exchanges, access to Medicaid expansion
- "Every Child Matters" (showcase issues/solutions for children; look at TANF/mental health/ child care, etc.)

## **Breakout Discussion Details**

### **Group 1 (Room 5)**

#### **Surprises**

- Connection between various relations of state departments and the complexity in relation to each other and the county programs.
- Process of enrollment in CHIP and Medicaid is cumbersome and difficult
- In relation to county staffing: state encountered difficulty when experiencing staff shortages.

#### **Challenges**

- Pressure to prioritize projects and groups at state level. It's in pipeline, in what order/why?
- Some providers may drop Medicaid participation; how can it go any lower, especially with exchanges?
- Can the state be more helpful in listening to needs and concerns of nonprofits?
- How do we get from high level state perspective to local level?

#### **Opportunities**

- What portion of meeting needs of community can be met outside of government?
- Need for local involvement in state Medicaid and other programs
- How about alternatives to Medicaid?
- Can Fairfax qualify for grants from the Va. Center for Health Innovation Priorities?
- Seek better use of momentum/clarity of state management to local level
- More favorable formulas a local level. Careful: state uniformity may not always benefit the locality – dual system?

#### **Use of information at other/similar community forums?**

- What is government doing with the information gathered?

#### **Future Themes and Topics – Ideas**

1. Study of/ideas for persons who are homeless who need services – especially focusing on the needs of victims of domestic violence; and persons needing employment/assistance in obtaining better employment
2. Roles/responsibilities of the business community in meeting community human services needs
3. Dealing with clients holistically

Group 2

(Room 8)

### **Challenges**

1. Use of acronyms – need definitions/glossary of terms – ACTION: Creation of CAA : Citizens Against Acronyms. The average “lay” person cannot follow discussions – the content is “over their heads” because of acronyms
2. Surge of people seeking services, without additional resources to serve them
3. Competition for services
4. Applications for services are too complicated – 21 page computerization for Medicaid. This is a problem.
5. Mental health needs are not a joke – stigma against mental illness continues to exist
6. Different agencies need to coordinate issues
7. There were presentation issues in the room with the microphones and the slides (couldn't hear/see them)

### **Opportunities**

1. Need to continue forums and opportunities for sharing information – post forum – expected Human Services council to continue to connect people of similar interests.
2. Share information
3. MH and access to care – what are the unanswered questions - how are they addressed
4. RE the new Health Insurance exchanges – how will navigators be effective to reach youth needing mental health (and in transition to adulthood)
5. Need more supportive, long term housing, transitional housing supports
6. Technical problems – fix them
7. Need common language and terms to coordinate data collection
8. Supervisor Hudgins summarized the current Fairfax situation well
9. Secretary Hazel addressed variables; the Questions and answers by topic throughout the presentation would have been better
10. Use data across agencies

### Group 3

#### **Surprises**

- Medicaid – significant issues and concerns about access for people eligible
- Lack of urgency at state level about Medicaid expansion - because of costs
- Medicaid expansion glossed over - Committee making the recommendations
- Questions about the new health exchanges
- (RE Secretary Hazel's presentation): A lot of time spent on systems, not much on people
- Confused re answer about the Olmstead Act and the DOJ settlement
- Concern about the child care issues
- Political responses

#### **Challenges**

1. How can I help people get into the health exchanges?
2. From shelter system - not much that addressed this population at state level

#### **Opportunities**

1. Has the cost of not providing services ever been examined – particularly for mental health services?

#### **Use of information at other/similar community forums?**

1. Housing Summit – information helpful especially in how to help
2. This session is more informative than others
3. Gives us an idea how to make a difference
4. State and local money concerns:
  - Local Supervisors and advocates need to coordinate pressing Richmond on issues of importance EXAMPLE: TANF reimbursement rates
  - Infant-Toddler Connection funding – how can this be influenced; confusion about how program is funded. (NOTE: this is a state grant program provided under contract by the Fairfax-Falls Church Community Services Board for the Fairfax area; it has received insufficient state funding to meet demand for services; – the local government subsidizes)

#### **Future Themes and Topics – Ideas**

1. "Every Child Matters" (ties to a number of issues: TANF/mental health/ child care)
2. Collective Impact – how do we really know how we are doing in this area
3. **Community** dialogue on issues
4. Measure interpretation – what data are we using for looking at 'results'

#### **Next Steps/collective Actions**

- Educate legislators vigorously/develop relationships
- Interest groups write legislation – we need to be involved/share in the process
- Educate the community in general